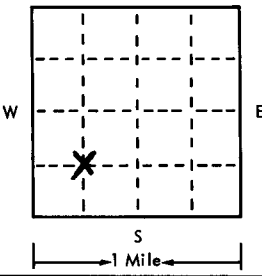


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County Grant	Township name Center of SW 1/4	Fraction 4	Section number 4	Town number T 28 S	Range number R 38 W								
Distance and direction from nearest town or city: 7 west & 5 north of Ulysses Street address of well location if in city:				3 Owner of well: Herman Cockreham Address: Johnson, Kansas										
Locate with "X" in section below: 			Sketch map: Well drilled 6-18-75			4 Well depth: 360 ft. Date of completion 7-1-75 Well diameter: 9 7/8 in.								
2 Type and color of material			From			To			5 <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary					
									6 Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>					
									7 Casing: Material Plastic Height: above / below Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. Diam. _____ Weight _____ lbs./ft. _____ 5 in. to 360 ft. depth! Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth!					
									8 Screen: Manufacturer Jet Stream Type Slotted Dia. 5" Slot/gauze .040 Length 30' Set between 330 ft. and 360 ft. _____ Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1/8"					
									9 Static water level: _____ ft. below land surface Date _____					
									10 Pumping level below land surfaces: Not pumped _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.					
									11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____					
									12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade					
									13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.					
									14 Nearest source of possible contamination: Septic Tank ft. 105 Direction west Type Septic Tank Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
									15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other					
									16 Remarks: elevation Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope Flat <input type="checkbox"/> Upland <input type="checkbox"/> Valley			17 Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Henkle Drilling & Supply 145 Business name _____ License No. _____ Address Box 639 Garden City, KS Signed J. H. Henkle Date 7/24/75 Authorized representative		

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5

DRILLERS TEST LOG

CUSTOMERS NAME Herman Cochran DATE 5-27-75
 STREET ADDRESS _____ TEST # 1 house well
 CITY & STATE Johnson, Kansas DRILLER Reda
 COUNTY Grant QUARTER SW SECTION 4 TOWNSHIP 28 RANGE 38

LOCATION 9 ft E of present well & 12 ft S.E. of S.E. corner of house
& 100 ft E of Septic tank

%	DRILLED from	FOOTAGE Pay to	Description of Strata	Static Water Level Proposed Well Depth
	0	3	top soil	
	3	60	Brown clay	
	60	140	Brown sandy clay & fine sand	
	140	145	sand fine med coarse	
	145	160	Brown clay	
	160	214	caliche, Brown clay & Very fine sand etc & Hyp rock	
50	214	16 230	sand fine med coarse small coarse & small gravel	
	230	235	lime stone (hard) med pull down	
55	235	5 240	sand fine med coarse & small gravel loose med water	
10	240	5 245	sand fine med coarse & Brown sandy clay	
	245	295	Brown clay & few fine sand etc	
	295	300	Hyp rock, sand, & Brown clay	
35	300	25 325	sand fine med coarse med small gravel & Brown sandy clay	
65	325	35 360	Very fine sandy silt red Bed etc Brown fertile sand stone med later water	
			360-330 Perf	
			330-0 Pipe	
			7 lbs Heavy # gravel rock	
			4-25# Regs Runout	
			1-5" Plastic lat on bottom of casing	
			1-5" Patches adapter	
			3-gal chlorine	
			Water Hardware 27 grain	